

Application Data Sheet

Application Information

Application number::
Filing Date:: 07/18/03
Application Type:: Regular
Subject Matter:: Utility

Suggested classification::

Suggested Group Art Unit::

CD-ROM or CD-R??::

Number of CD disks::

Number of copies of CDs::

Sequence Submission::

Computer Readable Form (CRF)?::

Number of copies of CRF::

Title::

METHOD AND APPARATUS FOR MASSIVELY
PARALLEL CONFIGURATION OF FPGAS

Attorney Docket Number::

015114-068100US

Request for Early Publication::

No

Request for Non-Publication::

Yes

Suggested Drawing Figure::

3

Total Drawing Sheets::

4

Small Entity?::

No

Latin name::

Variety denomination name::

Petition included?::

No

Petition Type::

Licensed US Govt. Agency::

Contract or Grant Numbers One::

Secrecy Order in Parent Appl.::

No

Applicant Information

Applicant Authority Type:: Inventor
Primary Citizenship Country:: US
Status:: Full Capacity
Given Name:: Paul
Middle Name::
Family Name:: Tracy
Name Suffix::

City of Residence:: Sunnyvale
State or Province of Residence:: CA
Country of Residence:: US
Street of Mailing Address:: 735 Bamboo Drive
City of Mailing Address:: Sunnyvale
State or Province of mailing address:: CA
Country of mailing address:: US
Postal or Zip Code of mailing address:: 94086

Applicant Authority Type:: Inventor
Primary Citizenship Country:: US
Status:: Full Capacity
Given Name:: Adam
Middle Name::
Family Name:: Wright
Name Suffix::
City of Residence:: San Jose
State or Province of Residence:: CA
Country of Residence:: US
Street of Mailing Address:: 435 Milan Court #118
City of Mailing Address:: San Jose
State or Province of mailing address:: CA

Country of mailing address:: US
Postal or Zip Code of mailing address:: 95134

Correspondence Information

Correspondence Customer Number:: 20350

Representative Information

Representative Customer Number:: 20350

Domestic Priority Information

Application:: Continuity Type:: Parent Application:: Parent Filing Date::

Foreign Priority Information

Country:: Application number:: Filing Date::

Assignee Information

Assignee Name::

Street of mailing address::

City of mailing address::

State or Province of mailing address::

Country of mailing address::

Postal or Zip Code of mailing address::